PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless corrected maintenance fee notification	below or directed otherwise	in Block 1, by (a) specifying	ng a new corre	espondence address;	and/or (b) indicating a sep	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 7590 06/08/2004 SUGHRUE MION ZINN MACPEAK 2100 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20037 SEP 0 7 2004 RADEMARK TRADEMARK				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. (Depositor's name) (Signature)			
							APPLICATION NO.
09/254,005	03/01/1999	TAKAFU	TAKAFUMI ATARASHI		Q53451	6345	
TITLE OF INVENTION: C	ONSOLIDATED MATERIA	AL OF COATED PULVERI	ZED BODIES	AND METHOD OF	MANUFACTURING THE	SAME	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBL	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	\$300		\$1630 ,	09/08/2004	
EXAMINER		ART UNIT	CLAS	SS-SUBCLASS]		
KRUER, KEVIN R		1773	42	28-404000	•		
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN 1) NITTETS 2) KATSUTC Please check the appropriate 4a. The following fee(s) are be used by the submitter of the submitter	on (or "Fee Address" Indicate or more recent) attached. Use the DRESIDENCE DATA TO Be an assignee is identified belied to the USPTO or is being stated in the USPTO of the USP	names agents firm (to agent) attorne will be reprinted under separate coverages (B) RESIDE (B) Payment A che please credit	of up to 3 OR, alternative along as a many and the name yes or agents. Printed. ENT (print or to pear on the part of the part	atent. Inclusion of as a of this form is NOT and STATE OR CONTAPAN JAPAN individual ched for the Namy payment any payment to POD	assignee data is only appropriate of a substitute for filing an assunt a	any overpayment, to	
other than the applicant; interest as shown by the re This collection of informs obtain or retain a benefit application. Confidentialit estimated to take 12 minu completed application for	ROSNEY d Publication Fee (if require a registered attorney or age cords of the United States Pa ation is required by 37 CFR by the public which is to fit y is governed by 35 U.S.C. I let to complete, including garn to the USPTO. Time will the amount of time your this burden, should be sent to Office, U.S. Department of SEND FEES OR COMPLE for Patents, Alexandria, Virg	ent; or the assignee or othe tent and Trademark Office. 1.311. The information is r le (and by the USPTO to p 22 and 37 CFR 1.14. This continues of the thering, preparing, and subtle and the preparing of the properties of the pr	equired to rocess) an ollection is nitting the individual	09/08/2004 01 FC:1501 02 FC:1504	EABUBAK2 00000069 09	254005 1330.00 OP 300.00 OP	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.